

SCIA 23 Rev. 5/98		<h1 style="margin: 0;">FINANCIAL AFFIDAVIT</h1>		IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE	
IN UNITED STATES <input checked="" type="checkbox"/> MAGISTRATE DISTRICT <input type="checkbox"/> APPEALS COURT or <input type="checkbox"/> OTHER PANEL (Specify below)					
IN THE CASE OF		FOR AT		LOCATION NUMBER	
USA V.S. STEVEN TUCKER		_____ _____		_____ _____	
PERSON REPRESENTED (Show your full name)		1 <input checked="" type="checkbox"/> Defendant—Adult 2 Defendant - Juvenile 3 Appellant 4 Probation Violator 5 Parole Violator 6 <input type="checkbox"/> Habeas Petitioner 7 <input type="checkbox"/> 2255 Petitioner 8 <input type="checkbox"/> Material Witness 9 <input type="checkbox"/> Other		DOCKET NUMBERS Magistrate 04-817-MBB District Court Court of Appeals	
CHARGE/OFFENSE (describe if applicable & check box →) <input checked="" type="checkbox"/> Felony 21 USC 846 <input type="checkbox"/> Misdemeanor					

## ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

ASSETS	EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed Name and address of employer: _____ IF YES, how much do you earn per month? \$ _____ IF NO, give month and year of last employment How much did you earn per month? \$ _____ If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____	
	OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <div style="display: flex; justify-content: space-between;"> <span>RECEIVED</span> <span>SOURCES</span> </div> IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$ _____ _____ _____	
	CASH	Have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ <u>25</u>	
	PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input type="checkbox"/> No <div style="display: flex; justify-content: space-between;"> <span>VALUE</span> <span>DESCRIPTION</span> </div> IF YES, GIVE THE VALUE AND \$ DESCRIBE IT _____ _____ _____	

OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents _____	List persons you actually support and your relationship to them _____ _____ _____		
	DEBTS & MONTHLY BILLS <small>(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)</small>	APARTMENT OR HOME:	Creditors	Total Debt	Monthly Paymt.	
		_____		\$ _____	\$ _____	
		_____		\$ _____	\$ _____	

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)

4/13/04